



**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing **OR** ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 21122YP

First Named Inventor Steven S. Carroll et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NUCLEOSIDE DERIVATIVES AS INHIBITORS OF RNA-DEPENDENT RNA VIRAL POLYMERASE

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
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Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/390,579	06/21/2002	21122PV

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U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US03/19172	06/17/2003	

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☒ Practitioners Associated with the Customer Number **000210**
 OR
☐ Registered practitioner(s) named below

Name	Registration Number	Name	Registration Number

Direct all correspondence to: ☒ Customer Number **000210**

Name	Philippe L. Durette				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4568	Fax	(732)594-4720

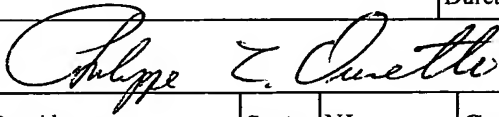
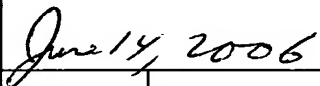
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Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Steven S.			Carroll		
Inventor's Signature				Date	
Residence: City	Yardley	State	PA	Country	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
				Country	U.S.A.

☒ Additional inventors are being named on the 2 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION AND POWER OF ATTORNEY	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
David B.				Olsen			
Inventor's Signature						Date	
Residence: City	Lansdale	State	PA	Country	US	Citizenship	US
Mailing Address		Merck & Co., Inc. P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Philippe L.				Durette			
Inventor's Signature						Date	
Residence: City	New Providence	State	NJ	Country	US	Citizenship	US
Mailing Address		Merck & Co., Inc. P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907	Country	U.S.A.

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Balkrishen				Bhat			
Inventor's Signature						Date	
Residence: City	Carlsbad	State	CA	Country	US	Citizenship	IN
Mailing Address		ISIS Pharmaceuticals, 2292 Faraday Avenue					
City	Carlsbad	State	CA	ZIP	92008	Country	US

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Prasad				Dande			
Inventor's Signature						Date	
Residence: City	Carlsbad	State	CA	Country	US	Citizenship	IN
Mailing Address							
City		State		ZIP		Country	

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Given Name (first and middle [if any])				Family Name or Surname			
Anne B.				Eldrup			
Inventor's Signature						Date	
Residence: City	Danbury	State	CT	Country	US	Citizenship	NL
Mailing Address		ISIS Pharmaceuticals, 2292 Faraday Avenue					
City	Carlsbad	State	CA	ZIP	92008	Country	US
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Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
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Mailing Address							
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	First Named Inventor	Steven S. Carroll et al.
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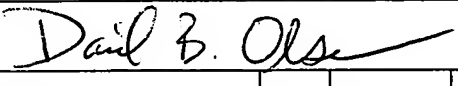
Name	Philippe L. Durette				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4568	Fax	(732)594-4720

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Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Steven S.			Carroll		
Inventor's Signature	<i>Steven S. Carroll</i>			Date	April 5, 2006
Residence: City	Yardley	State	PA	Country	US
				Citizenship	US
Mailing Address	Merck & Co., Inc. P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
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Inventor's Signature						Date	5 Apr 06
Residence: City	Lansdale	State	PA	Country	US	Citizenship	US
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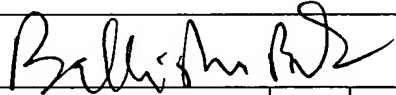
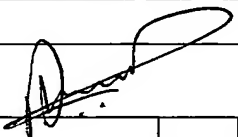
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Inventor's Signature				Date	
Residence: City	Yardley	State	PA	Country	US
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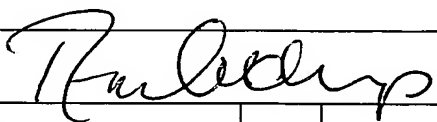
DECLARATION AND POWER OF ATTORNEY

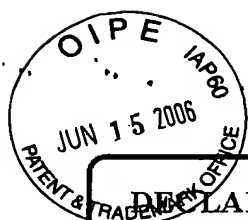
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Balkrishen				Bhat			
Inventor's Signature					Date		4/28/2006
Residence: City		Carlsbad		State	CA	Country	US
Mailing Address		ISIS Pharmaceuticals, 1896 Rutherford Road					
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City					State		ZIP				Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				Family Name or Surname								
Inventor's Signature								Date				
Residence: City				State		Country			Citizenship			
Mailing Address												
City					State		ZIP				Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				Family Name or Surname								
Inventor's Signature								Date				
Residence: City				State		Country			Citizenship			
Mailing Address												
City					State		ZIP				Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				Family Name or Surname								
Inventor's Signature								Date				
Residence: City				State		Country			Citizenship			
Mailing Address												
City					State		ZIP				Country	



DECLARATION AND POWER OF ATTORNEY

**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Mailing Address							
City		State		ZIP		Country	

